



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the Matter of the Application of: Masaaki Iwasaki

Serial No.: 10/008,210

Filed: 11/8/2001

For: **Movable Connector**

Examiner: Hien D. Vu

Group Art Unit: 2833

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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JoAnn F. Dillaway
JoAnn F. Dillaway

AMENDMENT

Sir:

In response to the Office Action mailed October 1, 2003 that has a shortened statutory period for response set to expire on January 1, 2004, entry of the following amendments is respectfully requested:



4)

2833

PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number Filing Date First Named Inventor Art Unit Examiner Name	10/008,210 11/8/2001 Masaaki Iwasaki 2833 Hien D. Vu
Total Number of Pages in This Submission	11
	Attorney Docket Number 21334-1089

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Acknowledgement Card
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Jennifer Mae Slonaker - Barley, Snyder, Senft & Cohen, LLC		
Signature			
Date	12/23/2003		

CERTIFICATE OF TRANSMISSION/MAILING

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	Date	12/23/2003	

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